

PRINTED: 04/08/2015
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HALD85009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/12/2015
NAME OF PROVIDER OR SUPPLIER PRIDDY MANOR ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 1294 PRIDDY ROAD KING, NC 27021		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This is a Report of a Biennial Construction Survey conducted by Greg Cates and Dennis Harrell March 12, 2015. Based on Information from our files, the facility was first licensed or submitted for licensure on April 29, 2003 as an Adult Care Facility with a total capacity of Seventy (70) Residents, including Twenty-Four (24) Special Care Residents. Based on this information, we are requiring the facility to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable components of the current 2005 Licensing of Adult Care Homes of Seven or More Beds, and the 1998 (w/revisions) North Carolina State Building Code(s) for Group I Institutional Unrestrained Occupancy.	C 000		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observation, the facility has failed to maintain the building in a safe manner. Findings include: a- There are unsupported oxygen bottles being stored in the Service Corridor Closet. (Note: This deficiency was corrected prior to the surveyors leaving the facility.)	C 166		

CONSTRUCTION SECTION

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DATE FORM

4523

B74X21

If continuation sheet 1 of 4

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C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1- Based on observations, the facility failed to ensure that the fire safety, electrical, and mechanical systems are maintained safe and operating.</p> <p>Findings include:</p> <p>a- The GFCI receptacle in the A-Hall Med Room is tripped and will not reset.</p> <p>b- The Exterior Gas Water Heater Room is not equipped with a hi/lo combustion air provision.</p> <p>c- In the HVAC return ducts, there are no access ports for inspection or cleaning of the duct smoke detection sampling tubes.</p> <p>2- Based on observations, the facility failed to ensure that the one-hour rating of the ceiling was maintained.</p> <p>Findings include:</p> <p>a- There are insulated pipes in the Sprinkler Riser Room that penetrate the rated ceiling with gaps around the insulation and no fire</p>	C 189	<p>A. The Receptacle in the room was never used so it was removed and wires capped off. A solid face plate was used. 4/16/15</p> <p>B. Hi/Lo Combustion louvers were installed. 3/18/15</p> <p>C. Two access doors were installed above smoke detectors in return ducts. 3/17/15</p> <p>A. Cut away insulation and installed fire collar with fire sealant used 3/17/15</p>		

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C 189	Continued From page 2 caulk or any other fire-stopping method to seal the gaps. b- There is a sprinkler escutcheon missing, leaving a 1/2" gap around the sprinkler pipe. c- A line of sprinkler heads spreading from Storage Room A and into the Dining Room, are all dropped approximately 3/4" inches below the ceiling, exposing a gap around the sprinkler pipes that penetrate the rated ceiling. d- In Mechanical Room A, the following items were noted, to include but not limited to: 1- There are several communications conduits in Mechanical Room A that are not fire-caulked on the ends. 2- There are several PVC conduits in excess of 2-1/2" in the ceiling of Mechanical Room A that are not protected with a fire collar. 3- There are 2 PVC conduits through the rated wall that are not sealed around the ends. 4- The attic access cover is constructed of 2 sheets of drywall and is resting on a perimeter of 2x4 studs. e- In the attic above Mechanical Room A, there are communications cables penetrating the smoke wall that are not protected with fire caulk or another fire-proofing method.	C 189	B. Fire sealant was used to fill gap And sprinkler escutcheon installed. C 1. Raised sprinkler heads 3/4 inch was used to close gap at rated ceiling. D. 1. Fire caulked all conduit. 2. Installed Fire collars with fire sealant used as a smoke seal. 3. Installed Fire collars with fire sealant used as a smoke seal. 4. Used 3/4 inch plywood between 2 sheets of drywall. Used angle iron to rest on. E. Used Fire Caulk to seal all cables Penetrating wall. C. There will be a Wall heater installed to Maintain 75 degree under winter conditions.	3/24/15 3/24/15 4/2/15 4/2/15 4/2/15 4/8/15 4/9/15 5/19/15
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.	C 191		

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C 191	Continued From page 3 (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to prevent the use of portable heaters in the facility. Findings include: a- There is a portable space heater being used in the Sprinkler Riser Room. (Note: This deficiency was corrected prior to the surveyors leaving the facility.)	C 191		